

HOUSE No. 03367

The Commonwealth of Massachusetts

PRESENTED BY:

Jason M. Lewis

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act to reduce healthcare costs by promoting provider education through academic detailing.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Jason M. Lewis</i>	<i>31st Middlesex</i>
<i>Patricia D. Jehlen</i>	<i>Second Middlesex</i>
<i>Jonathan Hecht</i>	<i>29th Middlesex</i>

HOUSE No. 03367

By Mr. Lewis of Winchester, a petition (accompanied by bill, House, No. [BILL NUMBER]) of Jason M. Lewis and others for legislation to reduce health care costs by promoting additional education on cost effectiveness to providers. Public Health.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act to reduce healthcare costs by promoting provider education through academic detailing.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- 1 SECTION 1. Chapter 111 of the General Laws, as appearing in the 2008 Official Edition, is
2 hereby amended by striking out section 4N and inserting in place thereof the following section:-
- 3 Section 4N. (a) The department shall, in cooperation with Commonwealth Medicine at the
4 University of Massachusetts medical school, develop, implement and promote an evidence-based
5 outreach and education program about the therapeutic and cost-effective utilization of
6 prescription drugs for physicians, pharmacists and other health care professionals authorized to
7 prescribe and dispense prescription drugs. In developing the program, the department shall
8 consult with physicians, pharmacists, private insurers, hospitals, pharmacy benefit managers, the
9 MassHealth drug utilization review board and the University of Massachusetts medical school.
- 10 (b) The program shall arrange for physicians, pharmacists and nurses under contract with the
11 department to conduct face-to-face visits with prescribers, utilizing evidence-based materials and

12 borrowing methods from behavioral science, educational theory and, where appropriate,
13 pharmaceutical industry data and outreach techniques; provided, however, that to the extent
14 possible, the program shall inform prescribers about therapeutically-equivalent pharmaceutical
15 alternatives or other evidence-based treatment options.

16 The program shall include outreach to: physicians and other health care practitioners who
17 participate in MassHealth, the subsidized catastrophic prescription drug insurance program
18 authorized in section 39 of chapter 19A or the commonwealth care health insurance program;
19 other publicly-funded, contracted or subsidized health care programs; academic medical centers;
20 and other prescribers.

21 The department shall, to the extent possible, utilize or incorporate into its program other
22 independent educational resources or models proven effective in promoting high quality,
23 evidenced-based, cost-effective information regarding the effectiveness and safety of
24 prescription drugs, including, but not limited to: (i) the Pennsylvania PACE/Harvard University
25 Independent Drug Information Service; (ii) the Academic Detailing Program of the University of
26 Vermont College of Medicine Area Health Education Centers; (iii) the Oregon Health and
27 Science University Evidence-based Practice Center's Drug Effectiveness Review project; and
28 (iv) the South Carolina evidence-based peer-to-peer education program outreach program and (v)
29 research on academic detailing to improve prescribing by faculty at Harvard Medical
30 School/Brigham and Women's Hospital.

31 (c) The department may establish and collect fees for subscriptions and contracts with private
32 payers. The department may seek funding from nongovernmental health access foundations and

33 undesignated drug litigation settlement funds associated with pharmaceutical marketing and
34 pricing practices, as well as other sources to ensure the ongoing support for this service.

35 (d) The department shall establish an adequate and sustainable funding source for the academic
36 detailing program. In determining an appropriate amount and source for this funding the
37 department shall review successful academic detailing programs in other states. Sources of
38 funding the department may consider include, but are not limited to, fees charged to
39 manufacturers and labelers doing business in the commonwealth, either as a flat fee or as a fixed
40 percentage of the cost to the state in purchasing drugs from the manufacturer/labeler as is used in
41 the state of Vermont; a pharmaceutical sales representative licensing program as is used in the
42 District of Colombia; a fee charged to health insurers in the commonwealth; or some
43 combination of the above.

44 SECTION 2. The department of public health shall promulgate regulations implementing this
45 act no later than 6 months after its passage.